

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL**

FOR: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER:

0 3 — 0 1 8

2. STATE:

Missouri

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL  
SECURITY ACT (MEDICAID)

4. PROPOSED EFFECTIVE DATE

October 1, 2003

TO: REGIONAL ADMINISTRATOR  
HEALTH CARE FINANCING ADMINISTRATION  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:

42 CFR 435.733

7. FEDERAL BUDGET IMPACT:

a. FFY 2004 \$ 10,980  
b. FFY 2005 \$ 10,980

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Attachment 2.6-A, Pages 4, 4a, 4b,  
4c, 5, 5a, 26a; and Supplement 12-A  
to Attachment 2.6-A, Page 19. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION  
OR ATTACHMENT (If Applicable):Attachment 2.6-A, Pages 4, 4a, 5,  
5a; Supplement 2 to Attachment  
2.6-A, Page 7.1  
Supplement 13 to Attachment 2.6-A,  
Page 5a

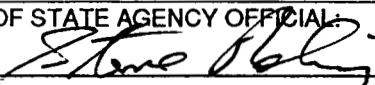
10. SUBJECT OF AMENDMENT:

Personal Needs Allowance for Institutionalized Individuals with  
Greater Need

11. GOVERNOR'S REVIEW (Check One):

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL☐ OTHER, AS SPECIFIED:*Missouri (03-018)*  
*Approved: 02/20/04*  
*Effective: 10/01/03*

12. SIGNATURE OF STATE AGENCY OFFICIAL:



13. TYPED NAME:

Steve Roling, Director

14. TITLE:

Department of Social Services

15. DATE SUBMITTED:

16. RETURN TO:

Denise Cross, Director  
Family Support Division  
P.O. Box 88  
Jefferson City, MO 65103

## FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED

SEP 26 2003

18. DATE APPROVED

FEB 20 2004

19. EFFECTIVE DATE OF APPROVED MATERIAL

OCT 01 2003

20. SIGNATURE OF REGIONAL OFFICIAL



21. TYPED NAME

Thomas W. Lenz

22. TITLE

Assistant Regional Administrator for Health

23. REMARKS:

State: Missouri

Citation	Condition or Requirement
<b>B. <u>Posteligibility Treatment of Institutionalized Individuals' Incomes</u></b>	
1. The following items are not considered in the posteligibility process:	
1902(o) of the Act	a. SSI and SSP benefits paid under §1611(e)(1)(E) and (G) of the Act to individuals who receive care in a hospital, nursing home, SNF, or ICF.
Bondi v. Sullivan (SSI)	b. Austrian Reparation Payments (pension (reparation) payments made under §500 - 506 of the Austrian General Social Insurance Act). Applies only if State follows SSI program rules with respect to the payments.
1902(r)(1) of the Act	c. German Reparations Payments (reparation payments made by the Federal Republic of Germany).
105/206 of P. L. 100-383	d. Japanese and Aleutian Restitution Payments.
1. (a) of P.L. 103-286	e. Netherlands Reparation Payments based on Nazi, but not Japanese, persecution (during World War II).
10405 of P.L. 101-239	f. Payments from the Agent Orange Settlement Fund or any other fund established pursuant to the settlement in the In re Agent orange product liability litigation, M.D.L. No.381 (E.D.N.Y.)
6(h)(2) of P.L. 101-426	g. Radiation Exposure Compensation.
12005 of P. L. 103-66	h. VA pensions limited to \$90 per month under 38 U.S.C. 5503.

TN No. MS-03-18

Supersedes

TN No. MS-91-44

Approval Date **FEB 20 2004**

Effective Date 10-1-03

State: Missouri

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Citation	Condition of Requirement
1924 of the Act 435.725 435.733 435.832	<p>2. The following monthly amounts for personal needs are deducted from total monthly income in the application of an institutionalized individual's or couple's income to the cost of institutionalized care:</p> <p>Personal Needs Allowance (PNA) of not less than \$30 For Individual and \$60 For Couples For All Institutionalized Persons.</p> <p>a. Aged, blind, disabled: Individuals \$ 30.00 Couples \$ 60.00</p> <p>For the following persons with greater need:</p> <ul style="list-style-type: none"><li>• Individuals who participate in sheltered workshops</li><li>• Individuals who are paying child support ordered by a court or the state child support agency</li></ul> <p>Supplement 12a to Attachment 2.6-A describes the greater need describes the basis or formula for determining the deductible amount when a specific amount is not listed above; lists the criteria to be met; and, where appropriate, identifies the organizational unit which determines that a criterion is met.</p> <p>b. AFDC related: Children \$ 30 Adults \$ 30</p> <p>For the following persons with greater need:</p> <p>NA</p> <p>Supplement 12a to Attachment 2.6-A describes the greater need describes the basis or formula for determining the deductible amount when a specific amount is not listed above; lists the criteria to be met; and, where appropriate, identifies the organizational unit which determines that a criterion is met.</p> <p>c. Individual under age 21 covered in the plan as specified in Item B. 7. Of Attachment 2.2-A. \$ 30.00</p>

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State: Missouri

Citation:

Condition of Requirement

For the following persons with greater need:

NA

Supplement 12 to Attachment 2.6-A describes the greater need describes the basis or formula for determining the deductible amount when a specific amount is not listed above; lists the criteria to be met; and, where appropriate, identifies the organizational unit which determines that a criterion is met.

1924 of the Act

3. In addition to the amounts under item 2., the following monthly amounts are deducted from the remaining income of an institutionalized individual with a community spouse:

a. The monthly income allowance for the community spouse, calculated using the formula in §1924(d)(2), is the amount by which the maintenance needs standard exceeds the community spouse's income. The maintenance needs standard cannot exceed the maximum prescribed in §1924(d)(3)(C). The maintenance needs standard consists of a poverty level component plus an excess shelter allowance.

  X   The poverty level component is calculated using the applicable percentage (set out §1924(d)(3)(B) of the Act) of the official poverty level.

       The poverty level component is calculated using a percentage greater than the applicable percentage, equal to       %, of the official poverty level (still subject to maximum maintenance needs standard).

       The maintenance needs standard for all community spouses is set at the maximum permitted by §1924(d)(3)(C).

Except that, when applicable, the State will set the community spouse's monthly income allowance at the amount by which exceptional maintenance needs, established at a fair hearing, exceed the community spouse's income, or at the amount of any court-ordered support.

State: Missouri

Citation:

Condition or Requirement

In determining any excess shelter allowance, utility expenses are calculated using:

  X   the standard utility allowance under §5(e) of the Food Stamp Act of 1977 or

       the actual unreimbursable amount of the community spouse's utility expenses less any portion of such amount included in condominium or cooperative charges.

- b. The monthly income allowance for other dependent family members living with the community spouse is:

  X   one-third of the amount by which the poverty level component (calculated under §1924(d)(3)(A)(i) of the Act, using the applicable percentage specified in §1924(d)(3)(B) exceeds the dependent family member's monthly income.

       a greater amount calculated as follows:

The following definition is used in lieu of the definition provided by the Secretary to determine the dependency of family members under §1924(d)(1):

Minor children and persons who could be claimed as dependents for federal income tax purposes.

- c. Amounts for health care expenses described below that are incurred by and for the institutionalized individual and are not subject to payments by a third party:

(i) Medicaid, Medicare, and other health insurance premiums, deductibles, or coinsurance charges, or copayments.

(ii) Necessary medical or remedial care recognized under State law but not covered under the State plan. (Reasonable limits on amounts are described in Supplement 3 to ATTACHMENT 2.6-A.)

State: Missouri

Citation:

Condition or Requirement

435.725  
435.733  
435.832

4. In addition to any amounts deductible under the items above, the following monthly amounts are deducted from the remaining monthly income of an institutionalized individual or an institutionalized couple:

- a. An amount for the maintenance needs of each member of a family living in the institutionalized individual's home with no community spouse living in the home. The amount must be based on a reasonable assessment of need but must not exceed the higher of the:

- AFDC level or
- Medically needy level:

(Check one)

- ☒ AFDC levels in Supplement 1  
☐ Medically needy level in Supplement 1  
☐ Other: \$

- b. Amounts for health care expenses described below that have not been deducted under 3.c. above (i.e., for an institutionalized individual with a community spouse), are incurred by and for the institutionalized individual or institutionalized couple, and are not subject to the payment by a third party:

- (i) Medicaid, Medicare, and other health insurance premiums, deductibles, or coinsurance charges, or copayments.
- (ii) Necessary medical or remedial care recognized under State law but not covered under the State plan. (Reasonable limits on amount are described in Supplement 3 to ATTACHMENT 2.6-A.)

435.725  
435.733  
435.832

5. At the option of the State, as specified below, the following is deducted from any remaining monthly income of an institutionalized individual or an institutionalized couple:

A monthly amount for the maintenance of the home of the individual or couple for not longer than 6 months if a physician has certified that the individual, or one member of the institutionalized couple, is likely to return to the home within that period:

☒ No.

☐ Yes (the applicable amount is shown on page 5a.)

Revision: CMS-PM-02-1  
May 2002

ATTACHMENT 2.6-A  
Page 5a  
OMB No.:0938-0673

State: Missouri

Citation	Condition or Requirement
_____	Amount for maintenance of home is: \$_____.
_____	Amount for maintenance of home is the actual maintenance costs not to exceed \$_____.
_____	Amount for maintenance of home is deductible when countable income is determined under §1924(d)(1) of the Act only if the individual's home and the community spouse's home are different.
_____	Amount for maintenance of home is not deductible when countable income is determined under §1924 (d)(1) of the Act.

TN No. MS-03-18

Supersedes

TN No. MS-91-44

Approval Date **FEB 20 2004**

Effective Date 10-1-03

State: Missouri

Citation:

Condition or Requirement

1924 of the Act

15. The agency complies with the provisions of §1924 with respect to income and resource eligibility and post eligibility determinations for individuals who are expected to be institutionalized for at least 30 consecutive days and who have a spouse living in the community.

When applying the formula used to determine the amount of resources in initial eligibility determinations, the State standard for community spouse is:

\_\_\_\_\_ the maximum standard permitted by law;

  X   the minimum standard permitted by law; or

\$\_\_\_\_\_ a standard that is an amount between the minimum and the maximum.



Revision: CMS-02-1  
May 2002

SUPPLEMENT 12a TO  
ATTACHMENT 2.6-A  
Page 1  
OMB No.:0938-0673

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Missouri

VARIATIONS FROM THE BASIC PERSONAL NEEDS ALLOWANCE

- Institutionalized individuals who participate in sheltered workshops are allowed the personal needs allowance on Attachment 2.6A, page 4, item 2a plus the sheltered workshop income.
- Institutionalized individuals who by court or administrative order of a State Child Support Enforcement Agency are either ordered to pay current child support or ordered to have money withheld from their income to pay child support arrearages shall be allowed an additional personal needs allowance up to the amount of child support ordered that is actually paid.

TN No. MS-03-18  
Supersedes  
TN No. ~~MS-31-44~~

Approval Date **FEB 20 2004** Effective Date 10-1-03

*New*